



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor Application of
JERRY W. KREAMER

Serial No. 08/071,052

Filed: June 4, 1993

Invention: ASPIRIN AND VITAMIN AND/OR TRACE
ELEMENT COMPOSITIONS FOR THE
PREVENTION AND TREATMENT OF
VASCULAR DISEASE

Group Art Unit 1205

Examiner: T. Criares

PETITION FOR EXTENSION OF TIME

Honorable Commissioner of Patents and Trademarks
Washington, D.C. 20231

Dear Sir:

Enclosed herewith is an Amendment for filing as of this date; kindly also make of record the following fee calculations for amended claims:

INDEPENDENT CLAIM FEE:

- () ZERO This case contains no more than three total active independent claims. No fee is needed.
- (x) ZERO The total number of independent claims does not exceed the total number previously paid for in this case. No fee is required.
- () \$_____ The total number of independent claims has been increased by _____. A fee of \$38 (\$76) for each of the claims in excess of three is included.

TOTAL NUMBER OF CLAIMS FEE:

- () ZERO The total number of claims in this case does not exceed a total of 20 claims. No fee is needed.
- (x) ZERO The total number of claims paid for is not increased. No fee is needed.
- () \$_____ The total number of claims paid for exceed 20 and the number of claims has been increased. (The fee is calculated as \$11 (\$22) for each excess claim.)

Total number present now: _____
Previous maximum paid for: _____
Excess number of claims: _____

MULTIPLE DEPENDENCY PENALTY FEE:

- (x) ZERO No multiple dependent claim is present in this case or a multiple dependent claim has been paid for previously. No fee is required.
- () \$_____ A multiple dependent claim is now first presented in this case. A fee of \$120 (\$240) is required as a multiple claim penalty fee.

EXTENSION OF TIME PETITION:

- () ZERO This paper is filed within the shortened statutory period for response. No fee is required.
- (x) \$435.00 Applicant hereby petitions for an extension from the date of the Examiner's Action as follows:

() Extension for response within first month	\$55 (\$110)
() Extension for response within second month	\$185 (\$370)
(X) Extension for response within third month	\$435 (\$870)
() Extension for response within fourth month	\$680 (\$1,360)

- (X) \$435.00 Our check in the amount \$575.00, covering the extension fee and the Notice of Appeal fee is enclosed.
- (X) The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Account No. 12-2250. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

050 MH 12/07/94 08071052
Date: 11/18/94

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By

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